	. • .	Application or Docket Number						1					
PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003													
101672,713													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								ALL E	YIIIIY	OR	OTHER SMALL		
31							F	ATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BA	BIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			3) minus 20=		• 11		>	(\$ 9 =		OR	X\$18=	198	
INDEPENDENT CLAIMS			minus 3 =		4		7	(42ċ		OR	X84=	3.36	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT				+140=				+280=	7.70	
* If the difference in column 1 is less than zero, enter "O" in column 2							L			OR			l
CLAIMS AS AMENDED - PART II								OTAL	L	OR	TOTAL	1,284	
(Column 1) (Column 2) (Column 3)								MALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER	PRESENT EXTRA	A	ATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
NDM	Total	* 32	Minus	1111	<u> </u>	- /	Tx	\$ 9=	FEE	OR	X\$18=	IR O	1
AME	Independent	• 8	Minus	***	2	= /	×	42=		OR	X84=	7600	Re1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+280=		7
								TOTAL		OR	TOTAL ADDIT, FEE		
	.31.05 (Column 1) (Column 2) (Column 3)							****	1	•			1
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER	PRESENT EXTRA	R	ATÉ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDM	Total	. 32	Minus	- <	32	- /	×	\$ 9=	7	OR	X\$18=		
AMI	Independent FIRST PRESE	NTATION OF M	Minus	EPENDENT	CI AIM	- /	×	42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								40=		OR	+280=		
								TOTAL IT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colur		(Column 3)							
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N D N	Total	•	Minus	**		=	×	\$ 9=		OR	X\$18=	155	
ME	Independent	•	Minus	222		2	-			חט			
Ľ	FIRST PRESE	NTATION OF MI	ULTIPLE O	EPENDENT	CLAIM		 	42=		OR	X84=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								40 ⇒		OR	+280=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
			id For" (Tota	l or independ	ent) to the	highest number t	lound in	the app	ropriate bo	r in col	lumo 1.		
FORM	PTO-875 (RBM. 1:	202) 715 0	Avenue Of	ting Ohioe: 2003-	400.4540	mu.						COVINEDCE	

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